Application or	Docket	Number
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PATENT APPLICATION FEE DETERMINATION RECORD  Effective October 1, 2001												
CLAIMS AS FILED - PART I (Column 1) (Column 2)					SMAL		VTITY	.OR	OTHER SMALL			
TOTAL CLAIMS			12			R/		ſΈ	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBE	R EXTRA	BASIC FEE		370.00	OR	BASIC FEE	740.00
TOTAL CHARGEABLE CLAIMS			/2 minus 20=		•		X\$ 9=			OR	X\$18=	
INDEPENDENT CLAIMS 4 minus 3 = 1						X4:	2=		OR	X84=	84,0	
MULTIPLE DEPENDENT CLAIM PRESENT										-7.		
* If	the difference	in column 1 is	less than ze	ero ente	r "O" in co	olumn 2	+14			OR	+280=	0011
* If the difference in column 1 is less than zero, enter "0" in column 2								AL		OR	TOTAL	829,6
	12-19-63	(Column 1)	MENDEL	- PAR (Colui	III mn 2)	(Column 3)	SMA	ALL I	ENTITY	OR	OTHER SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO	EST BER	PRESENT EXTRA	. PA	ΓE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
PMO	Total	• 11	Minus	- 1	В	. ·	X\$	9=		OR	X\$18=	
MEN	Independent	•	Minus	***	4	=	X4:	2=		OR	X84=	
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM					+14	0=		OR	+280=		
							TAL		OR	TOTAL		
RCE <sub>10</sub> 18 .54 (Column 1) (Column 2) (Column 3)								FEE		1	ADDIT. FEE	
AMENOMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA	RA	TE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	• 4	Minus	** 6	20	. ~	X\$	9=		OR	X\$18=	
	Independent	• 2 NTATION OF MI	Minus	###	4 TCLAIM		X4	2=		OR	X84=	
	THOTTREDE	NIATION OF MA		LIVOLIV	T ODAM:		+14	0=		OR	+280=	
							ADDIT	OTAL FEE		OR	ADDIT. FEE	
(Column 1) (Column 2) (Column 3)												
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUA PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA	RA	ΤE	ADDI- TIONAL FEE	0	RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		9=		OR	X\$18=	
	Independent	*	Minus	***	T () 404		X4	2=		OR	X84=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						+14	0=		OR	+280=		

TOTAL ADDIT. FEE TOTAL ADDIT. FEE

<sup>\*</sup> If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."
\*\*\*If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.